

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 07/03/2014  
FORM APPROVED  
OMB NO. 0938-0391

454 8/08/14

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  445141	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED  06/24/2014
NAME OF PROVIDER OR SUPPLIER  BRADLEY HEALTH CARE & REHAB			STREET ADDRESS, CITY, STATE, ZIP CODE 2910 PEERLESS RD CLEVELAND, TN 37312		
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F 000	INITIAL COMMENTS  During the annual recertification survey and complaint survey #32965, #32542, #33171, conducted on June 22-24, 2014, no deficiencies were cited in relation to the complaint. Related deficiencies were cited for complaint #33417, under 42 CFR PART 482.13, Requirements for Long Term Care.	F 000	This Plan of Correction constitutes our written allegation of compliance.		
F 323 SS=D	483.25(h) FREE OF ACCIDENT HAZARDS/SUPERVISION/DEVICES  The facility must ensure that the resident environment remains as free of accident hazards as is possible; and each resident receives adequate supervision and assistance devices to prevent accidents.  This REQUIREMENT is not met as evidenced by: Based on medical record review, review of fall investigation, and interview, the facility failed to provide supervision to prevent accidents by ensuring safety devices were in place and correctly applied for one (#2) of two residents, from forty-six sampled residents reviewed.  The findings included:  Resident #2 was admitted to the facility on September 26, 2012 with a diagnosis including Alzheimer's Disease, Parkinson's Disease, Chronic pain, Legal Blindness, History of Fall, General Osteoarthritis, Nutritional Anemia, Hypertension, Osteoporosis, and Muscle Weakness.	F 323	"This Plan of Correction is submitted as required under Federal and State regulations and statues applicable to long term care providers. This Plan of Correction does not constitute an admission of liability on the part of the facility, and such liability is hereby, specifically denied. The submission of this Plan does not constitute agreement by the facility that the surveyor's findings or conclusions are accurate, that the findings constitute a deficiency, or that the scope of severity regarding any of the deficiencies cited are correctly applied."  F323  1. Resident #2 care plan was reviewed for appropriate fall interventions. Resident was assessed for proper placement and functionality of care planned interventions.  2. Conduct an audit of residents with personal and bed alarms to ensure proper placement and functionality. All personal and bed alarms were found to	7/15/14	

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE TITLE (X6) DATE

Any deficiency statement ending with an asterisk (\*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

JUL 16 2014

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F 323	<p>Continued From page 1</p> <p>Medical record review of Minimum Data Set (MDS) Quarterly Assessment dated April 1, 2014, revealed that the resident had a Brief Interview for Mental Status (BIMS) score of 10 (moderate cognitive impairment), required limited assistance with bed mobility and locomotion on unit once in wheelchair; required extensive assistance for dressing, transfers and toilet use; and had limited range of motion to bilateral lower extremities.</p> <p>Medical record review of the resident's care plan dated July 6, 2013, revealed the resident was assessed as being at risk of falls with interventions including "... bed alarm, personal alarm, nonskid socks and call light within reach ..."</p> <p>Medical record review and review of the facility's fall investigation dated July 31, 2013, revealed the resident sustained a fall from the wheelchair with no injury on July 31, 2013, at 3:50 p.m. Continued review revealed no documentation the personal alarm was in place and in working order. Further review revealed a soft belt was being attempted on the resident and had been incorrectly applied.</p> <p>Interview with Assistant Director of Nursing (ADON) on June 24, 2014, at 4:20 p.m., in the Administrator's office, confirmed there was no documentation the alarm was on the wheelchair and in working order at the time of the fall and confirmed the soft belt had been incorrectly applied.</p> <p>Medical record review and review of the facility's fall investigation dated August 2, 2013, revealed the resident sustained a fall without injury from</p>	F 323	<p>be in working order, and properly placed. Conduct an audit of residents with soft belts for proper placement. All soft belts were found to be properly placed.</p> <p>3. Scheduled safety checks, with documentation in health record, for proper placement and functionality implemented. Incident investigation documentation to include status of existing interventions at time of the new incident. Staff educated by Director of Nursing, and Staff Development Coordinator on how to complete and document safety checks. Licensed nurses educated by Director of Nursing, and Staff Development Coordinator that incident investigations will include status of prior interventions to include placement and functionality at time of incident.</p> <p>4. Random audits of residents with personal, bed alarms and soft belts will be conducted, by the DON, ADON and Clinical</p>		

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F 323	Continued From page 2 the bed on August 2, 2013, at 7:00 p.m. Continued review revealed no documentation the bed alarm was on and in working order.  Interview with Assistant Director of Nursing (ADON) on June 24, 2014, at 4:20 p.m., in the Administrator's office, confirmed there was no documentation the bed alarm was on and in working order at the time of the fall.	F 323	Managers weekly for 4 weeks then monthly for 4 months to ensure proper placement, functionality, and appropriate documentation of compliance in the medical record. The Quality Assurance focus committee which includes but not limited to the DON, Medical Director, Administrator, Rehab Director, and ADON, will meet and review the personal alarm, bed alarm and soft belt audits to ensure compliance of devices placement, functionality and documentation. A root cause analysis will be completed for any noncompliance discovered. A performance improvement plan will be created and presented in the Quality Assurance Performance Improvement meeting.		
F 371 SS=F	483.35(i) FOOD PROCURE, STORE/PREPARE/SERVE - SANITARY  The facility must - (1) Procure food from sources approved or considered satisfactory by Federal, State or local authorities; and (2) Store, prepare, distribute and serve food under sanitary conditions  This REQUIREMENT is not met as evidenced by: Based on observation and interview, the facility failed to ensure proper food storage procedures.  The findings included:  Observation with the day shift cook on June 22, 2014, at 10:00 a.m., in the kitchen, revealed the three compartment ice cream freezer had ice build-up around the inner opening of the first compartment freezer. Observation revealed the freezer temperature was 0 degrees. Interview with the Certified Dietary Manager (CDM) on June 22, 2014, at 10:25 a.m., confirmed the first	F 371			
		F371	1. The three compartment ice cream freezer has been defrosted and a new lid installed. We have installed a new gasket on the walk in	7/15/14	

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F 371	Continued From page 3 compartment of the ice cream freezer had ice build-up.  Observation and interview with the cook on June 22, 2014, at 10:05 a.m., in the kitchen, revealed the walk in freezer door gasket was loose and not sealing properly. Further observation revealed excessive ice on vinyl barrier curtain at entrance of walk in freezer, along with ice on the floor. Interview with the cook at that time confirmed the door gasket was loose and door was not completely sealed when closed. Further observation with the cook, of the walk in freezer revealed one-fourth bag frozen okra, open and not dated, and three-fourths bag of frozen lima beans, open and not dated. Observation revealed the walk in freezer temperature was 0 degrees. Interview with the cook, on June 22, 2014, at 10:18 a.m., confirmed the open bags of frozen okra and lima beans were open and undated.  Observation of the dry food storage revealed ½ bag dried biscuit gravy open and not dated, along with dried beans and potato chips that were open and not dated. Interview with the cook, in the dry food storage area, on June 22, 2014, at 10:22 a.m., confirmed the open bags of dried foods were open and undated.	F 371	freezer door. The okra and the lima beans that were open and undated have been discarded. The biscuit gravy, dried beans, and potato chips that were open and undated have been discarded. 2. The facility has determined that all residents who consume food by mouth have the potential to be affected. 3. Dietary staff will observe the ice cream freezer and the walk in freezer daily for possible ice build-up and notify dietary management of the need to defrost. Dietary staff will observe daily in the walk in freezer and the dried storage for open and undated food and report to dietary management. On June 23, July 7, and July 10 staff were in-serviced on the proper way to seal, date, and label food in the walk in freezer and dried storage. Twice per week an assigned dietary aide will monitor for adherence to proper sealing, dating, and labeling of food in freezer and dried storage and report any deviation to dietary management.		
F 514 SS=D	483.75(I)(1) RES RECORDS-COMPLETE/ACCURATE/ACCESSIB LE  The facility must maintain clinical records on each resident in accordance with accepted professional standards and practices that are complete; accurately documented; readily accessible; and systematically organized.	F 514			

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F 514	<p>Continued From page 4</p> <p>The clinical record must contain sufficient information to identify the resident; a record of the resident's assessments; the plan of care and services provided; the results of any preadmission screening conducted by the State; and progress notes.</p> <p>This REQUIREMENT is not met as evidenced by: Based on medical record review and interview, the facility failed to maintain accurate medical records for the administration of narcotics for six residents (#6, #91, #100, #115, #121 and #186) of forty-six residents reviewed.</p> <p>The findings include:</p> <p>Resident #6 was admitted to the facility on May 1, 2003, with diagnoses including Vascular Dementia, Urinary Tract Infection, Senile Osteoporosis, Hip Joint Replacement, and Congestive Heart Failure.</p> <p>Medical record review of the Controlled Substances Record dated January 2, 2014, revealed eight doses of Hydrocodone-APAP 5-325 (narcotic pain medication) was signed out as administered on the dates of January 2, 3, 5, 6, 7, 8, 9, and 10, 2014, by Licensed Practical Nurse (LPN) #5.</p> <p>Medical record review of the Medication Administration Record (MAR) for January 2014, revealed no documentation the Hydrocodone-APAP was administered on the dates of January 2, 3, 5, 6, 7, 8, 9, and 10, 2014.</p>	F 514	<p>4. The dietary manager or designee will complete random checks of dietary staff to monitor for proper procedure adhered to. This plan of correction will be monitored at the monthly QAPI meeting until such time consistent substantial compliance has been met.</p> <p><b>F514</b></p> <p>1. Pain assessments reviewed for residents #6, #91, #100, #115, #121, and #186 to ensure proper pain control. Conducted an audit of the current Controlled Substances Record and the Medication Administration Record for residents #6, #91, #100, #115, #121, and #186 to ensure the proper documentation of medications administered. Licensed Practical Nurse #5 was educated on proper narcotic documentation.</p> <p>2. Obtain a list of residents on controlled medications and</p>	7/15/14	

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F 514	<p>Continued From page 5</p> <p>Medical record review of the Controlled Substances Record dated January 13, 2014, revealed eight doses of Hydrocodone-APAP 5-325 was signed out as administered for resident #6 on the dates of January 13, 14, 15, 16, 17, 20, 21, and 27, 2014, by LPN #5.</p> <p>Medical record review of the MAR for January 2014, revealed no documentation on the MAR for the dates of January 13, 14, 15, 16, 17, 20, 2014, of the Hydrocodone having been administered by LPN #5.</p> <p>Medical record review of the Controlled Substances Record dated February 2, 2014, revealed eight doses of Hydrocodone-APAP 5-325 was signed out as administered to resident #6 on the dates of February 5, 6, 7, 10, 11, 12 and 13, 2014, by LPN #5.</p> <p>Medical record review of the MAR for February 2014, revealed no documentation the Hydrocodone was administered on the dates of February 6, 7, 10, and 13, 2014. Further review of the MAR revealed there was documentation of administration of the Hydrocodone by LPN #5 on February 3, 4, and 14, 2014, but there was no documentation of signing the medication out on the Controlled Substances Record.</p> <p>Medical record review of the Controlled Substances Record dated February 17, 2014, revealed Hydrocodone-APAP 5-325 was signed out as administered to resident #6 on the dates of February 17, and 21, 2014, by LPN #5.</p> <p>Medical record review of the MAR for February 2014, revealed no documentation the Hydrocodone was administered on the dates of</p>	F 514	<p>compare current Controlled Substances Records against the corresponding Medication Administration Record to ensure proper documentation of medications administered. Pain assessments reviewed for any resident with documentation discrepancies to ensure appropriate pain control. Licensed Staff with documentation discrepancies, educated on proper narcotic documentation.</p> <p>3. Licensed Nurses conduct a narcotic verification count at the end of their shift, both nurses will verify that narcotics given during the prior shift have been documented appropriately before accepting narcotic box keys and responsibilities. The Narcotic change over signature sheet will reflect the change in count procedures. Education of Licensed Staff on the proper documentation of narcotic administration and count procedures to be conducted by</p>		

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F 514	<p>Continued From page 6 February 17, and 21, 2014.</p> <p>Medical record review of the Controlled Substances Record dated February 26, 2014, revealed Hydrocodone-APAP 5-325 was signed out as administered on March 6, 2014, by LPN #5.</p> <p>Medical record review of the MAR for March 2014, revealed no documentation on the MAR for the date of March 6, 2014, of the Hydrocodone having been administered by LPN #5.</p> <p>Medical record review of the Controlled Substances Record dated March 7, 2014, revealed six doses of Hydrocodone-APAP 5-325 was signed out as administered on the dates of March 7, 10, 11, 12, 13, and 14, 2014, by LPN #5.</p> <p>Medical record review of the MAR for March 2014, revealed no documentation the medication was administered to resident #6 on March 7, 2014.</p> <p>Medical record review of the Controlled Substances Record dated March 25, 2014, revealed Hydrocodone-APAP 5-325 was signed out as administered on the date of March 31, 2014, by LPN #5.</p> <p>Medical record review of the MAR for March 2014, revealed no documentation the medication was administered to resident #6 on March 31, 2014.</p> <p>Medical record review of the Controlled Substances Record dated April 14, 2014, revealed Hydrocodone-APAP 5-325 was signed out as administered on April 15, 2014, by LPN #5.</p>	F 514	<p>Director of Nursing, Assistant Director of Nursing, Clinical Managers, and Staff Development Coordinator.</p> <p>4. Random audits of the narcotic change over signature sheets to ensure implementation of the narcotic count procedure with review of the Controlled Substance Record compared to the Medication Administration Record will be conducted by the Director of Nursing, Assistant Director of Nursing, and Clinical Nurse Managers weekly for 4 weeks, then monthly for 4 months, to ensure compliance. The Quality Assurance focus committee which includes but not limited to the Director of Nursing, Medical Director, Administrator, Rehab Director, Assistant Director of Nursing, Clinical Managers, Charge Nurses, Certified Nursing Assistants, and Social Services Director, will meet weekly for 4 weeks, then monthly for 4 months and review the Controlled Substance</p>		

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F 514	<p>Continued From page 7</p> <p>Medical record review of the MAR for April 2014, revealed no documentation the medication was administered to resident #6 on April 15, 2014.</p> <p>Medical record review of the Controlled Substances Record dated April 22, 2014, revealed five doses of Hydrocodone-APAP 5-325 was signed out as administered on April 30, 2014, by LPN #5.</p> <p>Medical record review of the MAR for May 2014, revealed no documentation the medication was administered to resident #6 on April 30, 2014.</p> <p>Medical record review of the Controlled Substances Record dated May 20, 2014, revealed six doses of Hydrocodone-APAP 5-325 was signed out as administered on May 30, 2014, by LPN #5.</p> <p>Medical record review of the MAR for May 2014, revealed no documentation the medication was administered to resident #6 on May 30, 2014.</p> <p>Resident #91 was admitted to the facility on July 14, 2006, with diagnoses including Atrial Fibrillation, Muscle Weakness, Senile Degeneration of the Brain, Alzheimer's Disease, and Anxiety.</p> <p>Medical record review of the Controlled Substances Record dated January 3, 2014, revealed eight doses of Hydrocodone-APAP 5-325 (narcotic pain medication) was signed out as administered for resident #91 on the dates of January 3, 5, 6, 7, 8, 9, 10, and 13, 2014, by LPN #5.</p>	F 514	documentation audits to ensure compliance of proper documentation. A root cause analysis will be completed for any noncompliance discovered in the review of audits. A performance improvement plan will be created and presented in the monthly Quality Assurance Performance Improvement meeting.		



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F 514	<p>Continued From page 8</p> <p>Medical record review of the MAR for January 2014, revealed no documentation the the Hydrocodone-APAP was administered on January 3, 5, 6, 7, 8, 9, 10, and 13, 2014.</p> <p>Medical record review of the Controlled Substances Record dated January 14, 2014, revealed eight doses of Hydrocodone-APAP 5-325 was signed out as administered for resident #91 on the dates of January 14, 15, 16, 17, 20, 21, 22, and 23, 2014, by LPN #5.</p> <p>Medical record review of the MAR for January 2014, revealed no documentation the Hydrocodone-APAP was administered on the dates of January 14, 15, 16, 17, 20, 21, 22, and 23, 2014.</p> <p>Medical record review of the Controlled Substances Record dated January 27, 2014, revealed Hydrocodone-APAP 5-325 was signed out as administered to resident #91 on the dates of January 27, 28, 2014, by LPN #5.</p> <p>Medical record review of the MAR for January 2014, revealed no documentation the Hydrocodone-APAP was administered on January 27, and 28, 2014.</p> <p>Medical record review of the Controlled Substances Record dated February 7, 2014, revealed Hydrocodone-APAP 5-325 was signed out as administered to resident #91 on the dates of February 17, 2014, by LPN #5.</p> <p>Medical record review of the MAR for February 2014, revealed no documentation the Hydrocodone was administered on February 17, 2014, of by LPN #5. Further review of the</p>	F 514			

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F 514	<p>Continued From page 9</p> <p>Medication Record revealed the Hydrocodone had been signed out as administered on February 8, 2014, but there was no documentation on the Controlled Substances Record.</p> <p>Medical record review of the Controlled Substances Record dated February 19, 2014, revealed Hydrocodone-APAP 5-325 was signed out as administered to resident #91 on February 20, 21, and 26, 2014, by LPN #5.</p> <p>Medical record review of the MAR for February 2014, revealed no documentation the Hydrocodone was administered on February 20, 21, and 26, 2014.</p> <p>Medical record review of the Controlled Substances Record dated March 27, 2014, revealed Hydrocodone-APAP 5-325 was signed out as administered to resident #91 on April 1, and 3, 2014, by LPN #5.</p> <p>Medical record review of the MAR for April 2014, revealed no documentation the Hydrocodone was administered on April 1, and 3, 2014.</p> <p>Medical record review of the Controlled Substances Record dated April 15, 2014, revealed Hydrocodone-APAP 5-325 was signed out as administered to resident #91 on April 15, 2014, by LPN #5.</p> <p>Medical record review of the MAR for April 2014, revealed no documentation the Hydrocodone was administered on April 15, 2014.</p> <p>Medical record review of the Controlled Substances Record dated April 23, 2014, revealed Hydrocodone-APAP 5-325 was signed</p>	F 514			

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NAME OF PROVIDER OR SUPPLIER  <b>BRADLEY HEALTH CARE &amp; REHAB</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>2910 PEERLESS RD CLEVELAND, TN 37312</b>		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)		(X5) COMPLETION DATE
F 514	<p>Continued From page 10</p> <p>out as administered to resident #91 on April 23, 2014, by LPN #5.</p> <p>Medical record review of the MAR for April 2014, revealed no documentation the Hydrocodone was administered on April 23, 2014.</p> <p>Resident #100 was admitted to the facility on July 23, 2010, with diagnoses including Hypertension, Senile Degeneration of Brain, Chronic Kidney Disease, and Vascular Dementia with Delusions.</p> <p>Medical record review of the Controlled Substances Record dated January 15, 2014, revealed Hydrocodone-APAP 7.5-325 was signed out as administered to resident #100 on January 16, 17, 20, 21, and 22, 2014, by LPN #5.</p> <p>Medical record review of the MAR for January 2014, revealed no documentation the Hydrocodone was administered on January 16, 17, 20, 21, and 22, 2014.</p> <p>Medical record review of the Controlled Substances Record dated January 27, 2014, revealed Hydrocodone-APAP 7.5-325 was signed out as administered to resident #100 on January 27, 28, 29, 31, February 3, 4, and 5, 2014, by LPN #5.</p> <p>Medical record review of the MAR for January 2014, revealed no documentation the Hydrocodone was administered on January 27, and 31, 2014.</p> <p>Medical record review of the Controlled Substances Record dated March 27, 2014, revealed Hydrocodone-APAP 7.5-325 was signed out as administered to resident #100 on April 1,</p>	F 514			

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F 514	<p>Continued From page 11 and 3, 2014, by LPN #5.</p> <p>Medical record review of the MAR for April 2014, revealed no documentation the Hydrocodone was administered on April 1, and 3, 2014.</p> <p>Medical record review of the Controlled Substances Record dated April 4, 2014, revealed Hydrocodone-APAP 7.5-325 was signed out as administered for resident #100 on April 5, 2014, by LPN #5.</p> <p>Medical record review of the MAR for April 2014, revealed no documentation the Hydrocodone was administered on April 5, 2014.</p> <p>Medical record review of the Controlled Substances Record dated April 23, 2014, revealed Hydrocodone-APAP 7.5-325 was signed out as administered to resident #100 on April 25, and 30, 2014, by LPN #5.</p> <p>Medical record review of the MAR for April 2014, revealed no documentation the Hydrocodone was administered on April 25, and 30, 2014.</p> <p>Medical record review of the Controlled Substances Record dated May 14, 2014, revealed Hydrocodone-APAP 7.5-325 was signed out as administered to resident #100 on May 16, 2014, by LPN #5.</p> <p>Medical record review of the MAR for May 2014, revealed no documentation the Hydrocodone was administered on May 16, 2014.</p> <p>Resident #115 was admitted to the facility on May 20, 2010, with diagnoses including Cardiomegaly, Senile Degeneration of Brain, Anemia, Anxiety,</p>	F 514			

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F 514	<p>Continued From page 12 and Adult Failure to Thrive.</p> <p>Medical record review of the Controlled Substances Record dated January 13, 2014, revealed Hydrocodone-APAP 5-325 was signed out as administered to resident #115 on January 13, 14, 15, 16, and 17, 2014, by LPN #5.</p> <p>Medical record review of the MAR for January 2014, revealed no documentation the Hydrocodone was administered on January 13, 14, 15, 16, and 17, 2014. Further review of the Medication Record revealed documentation the Hydrocodone had been administered by LPN #5 on January 24, 25, 27, and 29, but no documentation the narcotic had been signed out on the Controlled Substances Record.</p> <p>Medical record review of the Controlled Substances Record dated February 5, 2014, revealed Hydrocodone-APAP 5-325 was signed out as administered to resident #115 on February 10, 2014, by LPN #5.</p> <p>Medical record review of the MAR for February 2014, revealed no documentation the Hydrocodone was administered on February 10, 2014. Further review of the Medication Record revealed documentation the Hydrocodone was administered by LPN #5 on February 3 and 4, but no documentation the narcotic was signed out on the Controlled Substances Record.</p> <p>Medical record review of the Controlled Substances Record dated March 20, 2014, revealed Hydrocodone-APAP 5-325 was signed out as administered to resident #115 on March 31, and April 1, 2014, by LPN #5.</p>	F 514			

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NAME OF PROVIDER OR SUPPLIER

**BRADLEY HEALTH CARE & REHAB**

STREET ADDRESS, CITY, STATE, ZIP CODE

**2910 PEERLESS RD  
CLEVELAND, TN 37312**

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F 514	<p>Continued From page 13</p> <p>Medical record review of the MAR for March 2014, and April 2014, revealed no documentation the Hydrocodone was administered on March 31, and April 1, 2014.</p> <p>Medical record review of the Controlled Substances Record dated April 14, 2014, revealed Hydrocodone-APAP 5-325 was signed out as administered to resident #115 on April 14, and 17, 2014, by LPN #5.</p> <p>Medical record review of the MAR for April 2014, revealed no documentation the Hydrocodone was administered on April 14, and 17, 2014.</p> <p>Resident #121 was admitted to the facility on August 14, 2008, with diagnoses including Hypertension, Esophageal Reflux, Depressive Disorder, and Dementia.</p> <p>Medical record review of the Controlled Substances Record dated January 6, 2014, revealed Hydrocodone-APAP 7.5-325 was signed out as administered to resident #121 on January 7, 9, 10, 13, 14, and 15, 2014, by LPN #5.</p> <p>Medical record review of the MAR for January 2014, revealed no documentation the Hydrocodone was administered on January 7, 9, 10, 13, 14, and 15, 2014.</p> <p>Medical record review of the Controlled Substances Record dated January 16, 2014, revealed Hydrocodone-APAP 7.5-325 was signed out as administered to resident #121 on January 17, 21, 22, 23, and 25, 2014, by LPN #5.</p> <p>Medical record review of the MAR for January 2014, revealed no documentation the</p>	F 514		

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F 514	<p>Continued From page 14</p> <p>Hydrocodone was administered on January 17, 21, 22, 23 and 25, 2014.</p> <p>Medical record review of the Controlled Substances Record dated March 5, 2014, revealed Hydrocodone-APAP 7.5-325 was signed out as administered to resident #121 on March 11, 2014, by LPN #5.</p> <p>Medical record review of the MAR for March 2014, revealed no documentation the Hydrocodone was administered on March 11, 2014. Further review of the Medication Record revealed documentation the Hydrocodone was administered by LPN #5 on March 8, and 9, but no documentation the narcotic was signed out on the Controlled Substances Record.</p> <p>Medical record review of the Controlled Substances Record dated March 31, 2014, revealed Hydrocodone-APAP 7.5-325 was signed out as administered to resident #121 on March 31, April 1, 3, 4, 7, 8, 9, and 10, 2014, by LPN #5.</p> <p>Medical record review of the MAR for March 2014, revealed no documentation the Hydrocodone was administered on March 31, April 1, 3, 4, 7, 8, 9, and 10, 2014.</p> <p>Medical record review of the Controlled Substances Record dated April 11, 2014, revealed Hydrocodone-APAP 7.5-325 was signed out as administered to resident #121 on April 11, 2014, by LPN #5.</p> <p>Medical record review of the MAR for April 2014, revealed no documentation of the Hydrocodone was administered on April 11, 2014.</p>	F 514		

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F 514	<p>Continued From page 15</p> <p>Medical record review of the Controlled Substances Record dated April 19, 2014, revealed Hydrocodone-APAP 7.5-325 was signed out as administered to resident #121 on April 25, 2014, by LPN #5.</p> <p>Medical record review of the MAR for April 2014, revealed no documentation the Hydrocodone was administered on April 25, 2014.</p> <p>Medical record review of the Controlled Substances Record dated May 14, 2014, revealed Hydrocodone-APAP 7.5-325 was signed out as administered to resident #121 on May 19, 2014, by LPN #5.</p> <p>Medical record review of the Medication Record for May 2014, revealed no documentation the Hydrocodone was administered on the April 19, 2014.</p> <p>Resident #186 was admitted to the facility on May 12, 2013, with diagnoses including Muscle Weakness, Asthma, Vascular Dementia with Delusions, Senile Dementia, and Cardiomegaly.</p> <p>Medical record review of the Controlled Substances Record dated March 31, 2014, revealed Hydrocodone-APAP 5-325 was signed out as administered to resident #186 on April 4, 7, and 8, 2014, by LPN #5.</p> <p>Medical record review of the MAR for April 2014, revealed no documentation the Hydrocodone was administered on April 4, 2014.</p> <p>Medical record review of the Controlled Substances Record dated April 9, 2014, revealed Hydrocodone-APAP 5-325 was signed out as</p>	F 514			



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F 514	<p>Continued From page 16</p> <p>administered to resident #186 on April 14, 2014, by LPN #5.</p> <p>Medical record review of the MAR for April 2014, revealed no documentation the Hydrocodone was administered on April 14, 2014.</p> <p>Medical record review of the Controlled Substances Record dated April 14, 2014, revealed Hydrocodone-APAP 5-325 was signed out as administered to resident #186 on April 18, 2014, by LPN #5.</p> <p>Medical record review of the MAR for April 2014, revealed no documentation the Hydrocodone was administered on April 18, 2014.</p> <p>Medical record review of the Controlled Substances Record dated May 2, 2014, revealed Hydrocodone-APAP 5-325 was signed out as administered to resident #186 on May 9, 2014, by LPN #5.</p> <p>Medical record review of the MAR for May 2014, revealed no documentation the Hydrocodone was administered on May 9, 2014.</p> <p>Medical record review of the Controlled Substances Record dated May 26, 2014, revealed Hydrocodone-APAP 5-325 was signed out as administered to resident #186 on of May 30, 2014, by LPN #5.</p> <p>Medical record review of the MAR for May 2014, revealed no documentation the Hydrocodone was administered on May 30, 2014.</p> <p>Medical record review of the Controlled Substances Record dated May 29, 2014,</p>	F 514			

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F 514	<p>Continued From page 17</p> <p>revealed Hydrocodone-APAP 5-325 was signed out as administered to resident #186 on June 6, 2014, by LPN #5.</p> <p>Medical record review of the MAR for June 2014, revealed no documentation the Hydrocodone having been administered on June 6, 2014.</p> <p>Interview with the Director of Nursing (DON) on June 24, 2014, at 11:00 a.m., in the DON office confirmed the facility was aware of the documentation errors. The DON confirmed the documentation errors had been investigated and LPN #5 had been given discipline regarding the errors in documentation. The DON further confirmed LPN #5 is still employed by the facility and works Monday through Friday each week.</p> <p>c/o #33417</p>	F 514			